

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Americas PAC

ADDRESS (number and street)

2560 Plymouth

Check if different
than previously
reported. (ACC)

Marion

IA

52302

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00559906

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

14

2016

09

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Donelson, Tom, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Donelson, Tom, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

10

14

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Americas PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		14		2016

To:

M M	/	D D	/	Y Y Y Y Y
09		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td colspan="5">112097.65</td></tr></table>	112097.65				
Y	Y	Y	Y	Y													
2016																	
112097.65																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">251328.65</td></tr></table>	251328.65															
251328.65																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">250000.00</td></tr></table>	250000.00					<table><tr><td colspan="5">1080700.00</td></tr></table>	1080700.00									
250000.00																	
1080700.00																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">501328.65</td></tr></table>	501328.65					<table><tr><td colspan="5">1192797.65</td></tr></table>	1192797.65									
501328.65																	
1192797.65																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">441622.00</td></tr></table>	441622.00					<table><tr><td colspan="5">1133091.00</td></tr></table>	1133091.00									
441622.00																	
1133091.00																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">59706.65</td></tr></table>	59706.65					<table><tr><td colspan="5">59706.65</td></tr></table>	59706.65									
59706.65																	
59706.65																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Americas PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	14	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

250000.00

1080000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

250000.00

1080000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

250000.00

1080000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

700.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

250000.00

1080700.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

250000.00

1080700.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	39150.00	195330.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	39150.00	195330.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	402472.00	937761.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	441622.00	1133091.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	441622.00	1133091.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	250000.00	1080000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	250000.00	1080000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	39150.00	195330.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	700.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	39150.00	194630.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Uihlein, Richard, , ,

Mailing Address 1396 N Waukegan Road

City
Lake Forest

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Uline

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050000.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.4625

Amount of Each Receipt this Period

250000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

250000.00

250000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. Donelson, Tom, , ,

Mailing Address 2560 Plymouth Street

City
MarionState
IAZip Code
52302Purpose of Disbursement
Operational & Fundraising Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	0		2	0	1	6		

FEC Identification Number

C **Transaction ID : SB21B.4608**

Amount of Each Disbursement this Period

 9000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Flores, Ariana, , ,

Mailing Address 8014 West 145 Ter

City
Overland ParkState
KSZip Code
66223Purpose of Disbursement
Media Production Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	1		2	0	1	6		

FEC Identification Number

C **Transaction ID : SB21B.4623**

Amount of Each Disbursement this Period

 750.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Furnish, Brad, , ,

Mailing Address 705 W. 76th Terrace

City
Kansas CityState
MOZip Code
64114Purpose of Disbursement
Media Placement & Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	5		2	0	1	6		

FEC Identification Number

C **Transaction ID : SB21B.4626**

Amount of Each Disbursement this Period

 6000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 15750.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. Furnish, Brad, , ,

Mailing Address 705 W. 76th Terrace

City
Kansas CityState
MOZip Code
64114Purpose of Disbursement
Strategic Media Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4630**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Holt, James, , ,

Mailing Address 410 NE Medford Drive

City
Lees SummitState
MOZip Code
64064Purpose of Disbursement
Media Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	1			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4641**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LeClerq, Barbara, , ,

Mailing Address 8640 Travis

City
Overland ParkState
KSZip Code
66212Purpose of Disbursement
Operational Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	6		

FEC Identification Number

C**Transaction ID : SB21B.4600**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. LeClerq, Barbara, , ,

Mailing Address 8640 Travis

City
Overland ParkState
KSZip Code
66212Purpose of Disbursement
Administrative Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				2	5						2	0	1	6

FEC Identification Number

C**Transaction ID : SB21B.4628**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lucas, Gabriela, , ,

Mailing Address 16160 S Heatherwood St.

City
OlatheState
KSZip Code
66062Purpose of Disbursement
Media Production Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				1	2						2	0	1	6

FEC Identification Number

C**Transaction ID : SB21B.4624**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Obregon, Ivan, , ,

Mailing Address 8315 W. 91st Terrace

City
Overland ParkState
KSZip Code
66212Purpose of Disbursement
Media Production Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				1	1						2	0	1	6

FEC Identification Number

C**Transaction ID : SB21B.4621**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. Robinson, Vernon, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2016

Mailing Address 2713 Edinberg Drive

City
Winston-SalemState
NCZip Code
27103Purpose of Disbursement
Fundraising Consulting Fee

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.4609**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Bespoke Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

Mailing Address PO Box 7221

City
ColumbiaState
MOZip Code
65205Purpose of Disbursement
Compliance

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.4599**

Amount of Each Disbursement this Period

3600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VCreek

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Mailing Address 2318 SW Briarwood

City
TopekaState
KSZip Code
66611Purpose of Disbursement
Media Consulting

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.4612**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5600.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. VCreek

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Mailing Address 2318 SW Briarwood

FEC Identification Number

C**Transaction ID : SB21B.4629**

Amount of Each Disbursement this Period

250.00

☐ Memo ItemCity
TopekaState
KSZip Code
66611Purpose of Disbursement
ResearchCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Voice Broadcasting

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2016

Mailing Address 1527 S. Cooper Street

FEC Identification Number

C**Transaction ID : SB21B.4601**

Amount of Each Disbursement this Period

2700.00

☐ Memo ItemCity
ArlingtonState
VAZip Code
76010Purpose of Disbursement
ResearchCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Voice Broadcasting

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Mailing Address 1527 S. Cooper Street

FEC Identification Number

C**Transaction ID : SB21B.4616**

Amount of Each Disbursement this Period

2700.00

☐ Memo ItemCity
ArlingtonState
VAZip Code
76010Purpose of Disbursement
PollingCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

5650.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Americas PAC

Full Name (Last, First, Middle Initial)

A. Voice Broadcasting

Mailing Address 1527 S. Cooper Street

City
ArlingtonState
VAZip Code
76010Purpose of Disbursement
Polling

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2016

FEC Identification Number

C**Transaction ID : SB21B.4635**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Voice Broadcasting

Mailing Address 1527 S. Cooper Street

City
ArlingtonState
VAZip Code
76010Purpose of Disbursement
Polling

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

FEC Identification Number

C**Transaction ID : SB21B.4661**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5400.00

TOTAL This Period (last page this line number only).....▶

39150.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 13 OF 18
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americas PAC				FEC IDENTIFICATION NUMBER ▼ C C00559906	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Cumulus Media			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016		
Mailing Address 595 East Plumb Lane			Amount 16000.00		
City Reno	State NV	Zip Code 89502	Transaction ID : SE.4636		
Purpose of Expenditure Media Purchase		Category/ Type 	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2016		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 145840.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Entravision			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016		
Mailing Address 1907 Mile High Stadium West Circle			Amount 111224.00		
City Denver	State CO	Zip Code 80204	Transaction ID : SE.4611		
Purpose of Expenditure Media Purchase		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 21 / 2016		
Name of Federal Candidate: BENNET, MICHAEL F, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 225064.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			127224.00		
(a) SUBTOTAL of Unitemized Independent Expenditures			 		
(a) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Donelson, Tom, , ,		[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 18
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americas PAC				FEC IDENTIFICATION NUMBER ▼ C C00559906	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Entravision			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016		
Mailing Address 1907 Mile High Stadium West Circle			Amount 1000.00		
City Denver		State CO	Zip Code 80204		Transaction ID : SE.4618
Purpose of Expenditure Media Purchase			Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY 07 / 22 / 2016
Name of Federal Candidate: BENNET, MICHAEL F, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: CO		
Calendar Year-To-Date Per Election for Office Sought 226064.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Entravision			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2016		
Mailing Address 1907 Mile High Stadium West Circle			Amount 56168.00		
City Denver		State CO	Zip Code 80204		Transaction ID : SE.4632
Purpose of Expenditure Media Placement			Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2016
Name of Federal Candidate: BENNET, MICHAEL F, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: CO		
Calendar Year-To-Date Per Election for Office Sought 282232.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			57168.00		
(a) SUBTOTAL of Unitemized Independent Expenditures			 		
(a) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Donelson, Tom, , ,		[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 15 OF 18
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americas PAC				FEC IDENTIFICATION NUMBER ▼ C C00559906	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Greeley Broadcasting Corp			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016		
Mailing Address 800 8th Ave. Suite 304			Amount 8000.00		
City Greeley		State CO	Zip Code 80631		Transaction ID : SE.4606
Purpose of Expenditure Media Purchase			Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY 07 / 20 / 2016
Name of Federal Candidate: BENNET, MICHAEL F, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 113840.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Kemp Broadcasting			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2016		
Mailing Address 3999 Las Vegas Blvd. Suite K			Amount 25600.00		
City Las Vegas		State NV	Zip Code 89119		Transaction ID : SE.4634
Purpose of Expenditure Media Placement			Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2016
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 129840.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			33600.00		
(a) SUBTOTAL of Unitemized Independent Expenditures			 		
(a) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Donelson, Tom, , ,		[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 16 OF 18
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americas PAC				FEC IDENTIFICATION NUMBER ▼ C C00559906	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Latino Communications Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 600 Grant St. #600			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2016		
City Denver	State CO	Zip Code 80203	Amount 59840.00		
Purpose of Expenditure Media Purchase		Category/ Type 	Transaction ID : SE.4604 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 20 / 2016		
Name of Federal Candidate: BENNET, MICHAEL F, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: CO		
Calendar Year-To-Date Per Election for Office Sought 85440.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Lotus Broadcasting			<input type="checkbox"/> Memo Item		
Mailing Address 8755 Flamingo			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2016		
City Las Vegas	State NV	Zip Code 89147	Amount 49600.00		
Purpose of Expenditure Media Placement		Category/ Type 	Transaction ID : SE.4631 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2016		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NV		
Calendar Year-To-Date Per Election for Office Sought 51600.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			109440.00		
(a) SUBTOTAL of Unitemized Independent Expenditures			 		
(a) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Donelson, Tom, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 18
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americas PAC				FEC IDENTIFICATION NUMBER ▼ C C00559906	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Salem Media Group <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 14 / 2016		
Mailing Address 6400 N. Belt Line Road			Amount 20400.00		
City Irving	State TX	Zip Code 75063	Transaction ID : SE.4605		
Purpose of Expenditure Media Purchase		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 20 / 2016		
Name of Federal Candidate: BENNET, MICHAEL F, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 105840.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Univision Radio Las Vegas <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2016		
Mailing Address 6767 W. Tropicana Ave. Suite 102			Amount 52640.00		
City Las Vegas	State NV	Zip Code 89103	Transaction ID : SE.4633		
Purpose of Expenditure Media Placement		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 05 / 2016		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 104240.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			73040.00		
(a) SUBTOTAL of Unitemized Independent Expenditures			 		
(a) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Donelson, Tom, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 18
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Americas PAC			FEC IDENTIFICATION NUMBER ▼ C C00559906		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y		
Full Name of Payee VCreek <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2016		
Mailing Address 2318 SW Briarwood			Amount 2000.00		
City Topeka	State KS	Zip Code 66611	Transaction ID : SE.4643		
Purpose of Expenditure Media Production		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 25 / 2016		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 2000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure		Category/ Type 			
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State:		
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			2000.00		
(a) SUBTOTAL of Unitemized Independent Expenditures			 		
(a) TOTAL Independent Expenditures			402472.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Donelson, Tom, , ,</i>			Date M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
[Electronically Filed]					